

FEC FORM 3L**REPORT OF CONTRIBUTIONS BUNDLED BY LOBBYISTS/REGISTRANTS
AND LOBBYIST/REGISTRANT PACs**

1. NAME OF COMMITTEE (in full) Hillary Victory Fund		TYPE OR PRINT PO Box 5256		Example: If typing, type over the lines. <div style="border: 1px solid black; padding: 2px;">12FE4M5</div>	
ADDRESS (number and street)		New York		NY	10185-5256
<input type="checkbox"/> Check if different than previously reported. (ACC)		CITY		STATE	ZIP CODE
2. FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px;">C C00586537</div>		3. IS THIS REPORT <input checked="" type="checkbox"/> NEW (N) OR <input type="checkbox"/> AMENDED (A)		4. STATE DISTRICT <div style="display: flex; justify-content: space-between;"><div>NY</div><div></div></div> For Candidates Only	
5. TYPE OF REPORT (Choose One) (a) Quarterly Reports: <input type="checkbox"/> April 15 Quarterly Report (Q1) <input type="checkbox"/> July 15 Quarterly Report (Q2) and/or Semi-annual Report <input type="checkbox"/> October 15 Quarterly Report (Q3) <input checked="" type="checkbox"/> January 31 Year-End Report (YE) and/or Semi-annual Report <input type="checkbox"/> July 31 Mid-Year Report (Non-election Year - PAC/Party) (MY) and/or Semi-annual Report		<div style="display: flex; justify-content: space-between;"><div style="width: 45%;">(b) Monthly Report Due On: <div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> Feb 20 (M2)</div><div><input type="checkbox"/> May 20 (M5)</div><div><input type="checkbox"/> Aug 20 (M8)</div><div><input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)</div></div><div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> Mar 20 (M3)</div><div><input type="checkbox"/> Jun 20 (M6)</div><div><input type="checkbox"/> Sep 20 (M9)</div><div><input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)</div></div><div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> Apr 20 (M4)</div><div><input type="checkbox"/> Jul 20 (M7) and/or Semi-annual Report</div><div><input type="checkbox"/> Oct 20 (M10)</div><div><input type="checkbox"/> Jan 31 (YE) and/or Semi-annual Report</div></div></div></div> <div style="display: flex; justify-content: space-between;"><div style="width: 45%;">(c) 12-Day PRE-Election Report for the: <div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> Primary (12P)</div><div><input type="checkbox"/> General (12G)</div><div><input type="checkbox"/> Runoff (12R)</div></div><div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> Special (12S)</div><div><input type="checkbox"/> Convention (12C)</div></div><div style="display: flex; justify-content: space-between;"><div>Election on</div><div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y Y Y</div></div><div>in the State of</div><div><div style="border: 1px solid black; padding: 2px;"> </div></div></div></div></div> <div style="width: 45%;">This report also covers the semi-annual period <input type="checkbox"/> See Line 6(b)</div>			

(d) 30-Day POST-Election Report for the:

☐ General (30G)

☐ Runoff (30R)

☐ Special (30S)

Election on

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Y Y Y Y Y Y Y Y

in the State of

This report also covers the semi-annual period

☐ See Line 6(b)

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Elizabeth Jones

Signature of Treasurer Elizabeth Jones [Electronically Filed] Date 01 / 31 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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02/2009